

The Commonwealth of Massachusetts Division of Professional Licensure

239 Causeway Street Boston, MA 02114 www.mass.gov/dplboards/el

Board of State Examiners of Electricians (617)727-9931 NOT TO BE USED BY VOCATIONAL TRADE SCHOOLS FORM 225

CERTIFICATE OF SCHOOL EXPERIENCE

Application for the Journeyman Electrician or Systems Technician Exam

To be used for courses taught within Massachusetts
Day or Evening programs

TO THE STATE EXAMINERS OF ELECTRICIANS

THE FOLLOWING IS TO BE COMPLETED BY SCHOOL OFFICIALS

			completed clas	ssroom instruction at
Name of Applicant	A	Address	Social Security Number	
Name of School	describe course of study– security/fire/light heat of power with hours successfully completed			
FromDate of Enrolln	20 nent of Course		20 te of Completion of Course	
	IN STATE-APPRO	OVED ELECT	RICAL PROGRAM ONLY	
Name of Designated S	chool Official - Type	e or Print	Title	
Signature of Designated School Official			Doto	

IMPRINT SCHOOL SEAL HERE

General laws, Chapter 141 Section 9. Any person making any misstatement as to his or her experience or other qualifications, or any person, firm or corporation subscribing to or vouching for any such misstatement, shall be subject to penalties set forth in Section 5.